

***CARS #: 400291***

**PROFILE ID TITLE:** MEDICAID SUBROGATION COLL

**FULL TITLE:** Medicaid Subrogation Collections

**REPORTING INSTRUCTIONS:** Report collections previously reported on the DMS-692 as Third Party Liabilities Medicaid collections on this profile. This includes collections received from an insurance company or other person liable for Medicaid payments. Report 100% of collections as a **NEGATIVE NUMBER**. The state will take back 85% of the reported amount, leaving a 15% incentive for the county.

**PROFILE TYPE:** Cash Adjustment (A)

**EXPENSES ROLL TO THIS PROFILE FROM:** N/A

**EXPENSES ROLL FROM THIS PROFILE TO:** N/A

**EXPENSES ALLOCATE TO THIS PROFILE FROM:** N/A

**EXPENSES ALLOCATE FROM THIS PROFILE TO:** N/A

**REIMBURSEMENT %:** 85

**PREPAYMENTS:** 0

**LIMITATIONS:** N/A

**FEDERAL CATALOG (CFDA) NUMBER:** 93.778

**DIVISION RESPONSIBLE:** Division of Health Care Financing